# **FORM D**



## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR JNIFORM LIMITED OFFERING EXEMPTION

	V	/ U
OMB API	PRO	VAL
OMB Number:		3235-0076
Expires:		May 31, 2005
Estimated average b	urde	n
hours per response.		16.00

SEC	USE ONI	.Y
Prefix		Serial
DAT	E RECEIV	ED

Name of Offering ( check if this is an Club Deal 133 Columbia Heights	amendment and name has changed, and indica , Limited Partnership of 240 units	ate change.) Sale by of limited partne	ership interests
Filing Under (Check box(es) that apply): Type of Filing:  New Filing  Amen	☐ Rule 504 ☐ Rule 505 ☒ Ru dment	le 506 🔲 Section	NOV 2 & 2007
	A. BASIC IDENTIFICATION	N DATA	
1. Enter the information requested about the	issuer		200/3
Name of Issuer ( check if this is an amer Partnership	dment and name has changed, and indicate ch	ange.) Club Deal	133 Columbia Heights, Limited
Address of Executive Offices	(Number and Street, City, State, 2	Zip Code)	Telephone Number (Including Area Code)
1350 East Newport Center Drive	, Suite 206, Deerfield Beach, Florid	la 33442	(954) 428-4585
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)		Telephone Number (Including Area Code)
Brief Description of Business: Acquisit	ion and development of property in	Brooklyn, New	York.
Type of Business Organization  corporation business trust	☑ limited partnership, already formed ☐ limited partnership, to be formed	Other (pleas	se specify): ability limited partnership, WOW, 3018102007
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizati	or Organization: 1 on: (Enter two-letter U.S. Postal Service abbre CN for Canada; FN for other foreign jurisdi	viation for State:	Actual Sestimated FINANCIAL

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

Attention: Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicted on the filing of a federal notice.



				A. BASIC IDENT	TFIC	ATION DATA				
Enter the information requirements of the     Each promoter of the     Each beneficial owne     Each executive office     Each general and man	issuer, r havir r and c	, if the issuering the power	has be to vot rporat	e or dispose, or directe issuers and of corp	t the v	ote or disposition of,				equity securities of the is suers; and
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	×	General and/or Managing Partner
full Name (Last name first, it	indivi	idual)								
Business or Residence Addre 1350 East Newport Co	ss (Nu enter	mber and Str Drive, Su	cct, C ite 2	ity, State, Zip Code) 06, Deerfield Be	ach,	Florida 33442				
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Reibling, Guenther*	f indiv	idual)	******							
Business or Residence Addre 1350 East Newport Co	ss (Nu enter	mber and St Drive, Su	reet, C	City, State, Zip Code) 06, Deerfield Be	ach,	Florida 33442				
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Kassof, Linda G.*	f indiv	ridual)								
Business or Residence Addr 1350 East Newport C	ess (Nu enter	imber and St Drive, St	reet, ( Lite 2	City, State, Zip Code)	each,	Florida 33442		<u>-</u>		
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Merrigan, Peter *	if indi	vidual)								
Business or Residence Addr 118 Milk Street, Bost					)					
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Reibling, Lorenz *	if indi	vidual)								
Business or Residence Adda 118 Milk Street, Bost					:)					
Check Box(es) that Apply:		Promoter		Beneficial Own	er [	Executive Office	er C	Directo	r [	General and/or Managing Partner
Full Name (Last name first, McGrath, Patrick*	if ind	ividual)	=							
Business or Residence Add 135 East 65 <sup>th</sup> Street,										

Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Moson, David*	if indiv	vidual)						
Business or Residence Addr 135 East 65 <sup>th</sup> Street, S	•		-		1		 	
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)						
Business or Residence Addr	ess (N	umber and S	reet, Ci	ty, State, Zip Code)				
(Use blank sheet, or copy an liability company, the partnership.								

					B. INFO	RMATIO	N ABOUT O	FFERING				
1. Has t	the issuer so	old, or doc	s the issuer in	itend to sell	, to non-ac	credited inv	estors in this	offering?	,			Yes No
				Ansv	wer also in a	Appendix, (	Column 2, if f	iling under U	LOE.			
2. What	t is the min	imum inve	stment that w	ill be acce	pted from a	ny individu	al?		,	••••••	<b>S_</b>	100,000*
3. Does	the offerin	ng permit j	oint ownershi	p of a singl	e unit?					•••••••		Yes No
come If a p	mission or s person to be ates, list the	similar ren e listed is a e name of t	Answer also in Appendix, Column 2, if filing under ULOE.  In investment that will be accepted from any individual?  In requested for each person who has been or will be paid or given, directly or indirectly, any lar remuneration for solicitation of purchasers in connection with sales of securities in the offering. It is an associated person or agent of a broker or dealer registered with the SEC and/or with a state me of the broker or dealer. If more than five (5) persons to be listed are associated persons of such you may set forth the information for that broker or dealer only.  Address (Number and Street, City, State, Zip Code)  Boston, Massachusetts 02109  Toker or Dealer ing, Inc.  Listed Has Solicited or Intends to Solicit Purchasers, DE, FL, MA, MD, NH, VA check individual States)  LZ] [AR] [CA] [CO] [CT] [DE] X [DC] [FL] X [GA] [HI] [MS] [NH] X [NJ] [NM] [NM] [MS] [ND] [NH] X [NJ] [NM] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [DR] [TN] [TX] [UT] [VT] [VA] X [WA] [WV] [WV] [WV] [WV]  First, if individual)  Address (Number and Street, City, State, Zip Code)  Toker or Dealer  Listed Has Solicited or Intends to Solicit Purchasers check individual States)  [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [NS] [NS] [NS] [NS] [NS] [NS] [NS] [NS									
	me (Last na , <b>James</b>	ame first, i	f individual)						. <u></u> ,			
						Zip Code)	. 110 (310) <del>31</del>					
	f Associate Capital F											
States is	n Which Pe	rson Liste	d Has Solicite	d or Intend	ls to Solicit	Purchasers	DE, FL, MA	, MD, NH, V	A			
(Check	"All States"	" or check	individual St	ates)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE] X	[DC]	[FL] X	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD] X	[MA] X	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]										[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[ບາງ	[VT]	[VA] X	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na <b>N/A</b>	me (Last na	ame first, i	f individual)									
Busines	s or Reside	ence Addre	ss (Number a	and Street, (	City, State,	Zip Code)				•		
Name o	f Associate	d Broker (	or Dealer	·								
States in	n Which Pe	rson Liste	d Has Solicite	ed or Intend	ls to Solicit	Purchasers			- <del> </del>			
(Check	"All States	or check	individual St	ates)					***************************************	***************************************	••••••	☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN)	[MS]	[MO]
DATI	[NE]											[PA]
		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
	[SC]									***************************************		
[RI] Full Na			f individual)									
[RI] Fuil Na N/A	me (Last n	ame first, i	f individual)	and Street,	City, State,	Zip Code)			-three control			····
[RI] Full Na N/A Busines	me (Last n	ame first, i	ess (Number a	and Street,	City, State,	Zip Code)						THE STATE OF
Full Na N/A Busines Name o	me (Last notes) of Associated	ame first, i	ess (Number a or Dealer d Has Solicite	ed or Intend	ds to Solicit	Purchasers						
N/A Busines Name of States i (Check	me (Last notes or Reside of Associate n Which Pe	ame first, i	ess (Number a or Dealer d Has Solicite individual St	ed or Intendates)	ds to Solicit	Purchasers						☐ All States
Full Na N/A Busines Name of States i (Check [AL]	me (Last notes of Associate n Which Per "All States	ame first, i	ess (Number a or Dealer d Has Solicite individual St [AR]	ed or Intendates)	ds to Solicit	Purchasers [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[RI] Full Na N/A Busines  States i (Check [AL] [IL]	me (Last notes of Associated notes of Associat	ame first, i	or Dealer d Has Solicite individual Se [AR] [KS]	ed or Intendental cates)	ds to Solicit [CO] [LA]	Purchasers [CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
Full Na N/A Busines Name of States i (Check [AL]	me (Last notes of Associate n Which Per "All States	ame first, i	ess (Number a or Dealer d Has Solicite individual St [AR]	ed or Intendates)	ds to Solicit	Purchasers [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]

\* The issuer may waive this minimum amount.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.</li> </ol>				
Type of Security		Aggregate Offering Price	An	nount Already Sold
Debt	\$	0	\$	0
Equity	_	0		0
☐ Common ☐ Preferred	-			<u> </u>
Convertible Securities (including warrants)	\$	0	\$	0
Partnership Interests	Ψ_ ©	24,000,000		000,000
Other (Specify)	_	0		0
Total				0
Answer also in Appendix, Column 3, if filing under ULOE.	Ψ_		Ψ	
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
		Number Investors		ollar Amount of Purchases
Accredited Investors		37	\$24.	000,000
Non-accredited Investors		0		0
Total (for filings under Rule 504 only)		0	\$	0
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
Type of offering		Type of Security	D	ollar Amount Sold
Rule 505		0	\$	Sold
Regulation A		0	\$	0
Rule 504	_	0	¢	
Total	_	0	\$	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<b>-</b>	
Transfer Agent's Fees			\$	0
Printing and Engraving Costs			\$	
Legal Fees			\$	10,000
Accounting Fees			\$	0,000
Engineering Fees		· ·	\$	0
Sales Commissions (specify finders' fees separately)			\$	<u></u>
Other Expenses (identify)			\$	0
Total			\$. \$	
		_	٠.	,,0

b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$22,788,500</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers.	
	Directors, & Affiliates	Payments To Others
Salaries and fees	□ \$ <u>_</u>	0 S O
Purchase of real estate	□ \$ <u>_</u>	<b>≥</b> \$ <u>14,000,000</u>
Purchase, rental or leasing and installation of machinery and equipment	□ \$ <u> </u>	0 🗆 \$0
Construction or leasing of plant buildings and facilities	□ \$ <u> </u>	0 \$0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$ <u> </u>	0 🗆 \$0
Repayment of indebtedness	□ \$ <u> </u>	0 \$0
Working capital	<b></b>	<u>⊠\$8,788,500</u>
Other (specify):		
	□ \$ <u> </u>	0 🗆 💲0
Column Totals	፟፟፟፟፟፟፟ \$	<u>0</u> ⊠ \$ <u>22,788,500</u>
Total Payments Listed (column totals added)	⊠ \$	22,788,500

(Signature Page Follows)

### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)  Club Deal 133 Columbia Heights, Limited Partnership, a Delaware limited partnership  BY: CD133 GP, LLC, a Delaware limited liability company, its General Partner	Signature	Date 11/27/07
Name (Print or Type) Peter Merrigan	Title (Print or Type)  Manager	

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Name (Print or Type) Peter Merrigan	Title (Print or Type)  Manager	
Club Deal 133 Columbia Heights, Limited Partnership, a Delaware limited partnership  BY: CD133 GP, LLC, a Delaware limited liability company, its General Partner		11/27/07
Issuer (Print or Type)	Signature	Date

## APPENDIX

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

i	i 2		3			4		<u> </u>	5 lification
	Intend to non-ac investors (Part B-	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	<u> </u>								ļ
AK									
AZ									
AR									
CA									
со									
СТ									
DE		X	Units of Limited Partnership Interests \$24,000,000	2	\$5,615000	0	0		X
DC									
FL		х	Units of Limited Partnership Interests \$24,000,000	3	320,000	0	0		х
GA						, 			
ні									
ID									
IL									
IN				_					
IA									
KS									
KY									
LA									
ME									
MD		х	Units of Limited Partnership Interests \$24,000,000	2	\$3,000,000	0	0		x
MA		х	Units of Limited Partnership Interests \$1,000,000	4	\$1,798,334	0	0		х

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price	Type of investor and				5 Disqualification under State ULOE (if yes, attach explanation of	
			offered in state (Part C-Item 1)	amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MI									
MN									
MS									
мо									
мт						<u> </u>			
NE									
NV									
NH		X	Units of Limited Partnership Interests \$24,000,000	2	\$416,666	0	0		х
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК									
OR									
PA									
RI				,					
sc						_			
SD							1		
IN									
тx									
UT									
VT									
VA		x	Units of Limited Partnership Interests \$24,000,000	2	\$1,500,000	0	0		x
WA									
wv				-					

İ	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WI									
WY			,						
PR									

